

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective December 8, 2004

Application or Docket Number

*10/536,535*

**CLAIMS AS FILED - PART I**

	(Column 1)	(Column 2)
U.S. NATIONAL STAGE FEES		
BASIC FEE	SMALL ENT. = \$ 150	LARGE ENT. = \$ 300
EXAMINATION FEE	Satisfies PCT Article 33(1). (4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200
SEARCH FEE	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400	All other situations = \$ 250 / \$ 500
FEE FOR EXTRA SPEC. PGS.	minus 100 =	/ 50 =
TOTAL CHARGEABLE CLAIMS	13 minus 20 =	.
INDEPENDENT CLAIMS	1 minus 3 =	.
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE	OR	OTHER THAN SMALL ENTITY
RATE	FEE	RATE
BASIC FEE	<input type="checkbox"/>	BASIC FEE
EXAM. FEE	<input type="checkbox"/>	EXAM. FEE
SEARCH FEE	<input type="checkbox"/>	SEARCH FEE
X \$ 125 =	<input type="checkbox"/>	X \$ 250 =
X \$ 25 =	<input type="checkbox"/>	X \$ 50 =
X \$ 100 =	<input type="checkbox"/>	X \$ 200 =
+ \$ 180 =	<input type="checkbox"/>	+ \$ 360 =
TOTAL	<input type="checkbox"/>	TOTAL

**CLAIMS AS AMENDED - PART II**

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	*	Minus	**
Independent	*	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
RATE	ADDI- TIONAL FEE	RATE
X \$ 25 =	<input type="checkbox"/>	X \$ 50 =
X \$ 100 =	<input type="checkbox"/>	X \$ 200 =
+ \$ 180 =	<input type="checkbox"/>	+ \$ 360 =
TOTAL ADDIT. FEE	<input type="checkbox"/>	TOTAL ADDIT. FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	*	Minus	**
Independent	*	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X \$ 25 =	<input type="checkbox"/>	X \$ 50 =	<input type="checkbox"/>
X \$ 100 =	<input type="checkbox"/>	X \$ 200 =	<input type="checkbox"/>
+ \$ 180 =	<input type="checkbox"/>	+ \$ 360 =	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>	TOTAL ADDIT. FEE	<input type="checkbox"/>

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.